

Annex II: IRDO Camp Atterbury Medical Prerequisites

History and Physical (within 1 year)

- ___ DD Forms 2808 and 2807-1 or OF178
- ___ Pre-deployment Health Assessment (PHA)

Labs (ABNORMAL RESULT MAY NEED REPEATED)

- ___ UA (NOT HAND WRITTEN) (within 90 days)
 - Needs to show color, gravity, PH, SP, CR
- ___ CHEM 7, CMP, BMP (within 90 days)
 - IF GLUCOSE OVER 100 NEEDS HBA1C
 - Must be < 7.0
- ___ CBC (within 90 days)
- ___ HIV (within 1 year)
- ___ DNA (Done at CAJMTC)
- ___ G6PD (must have result)
- ___ PPD (within 90 days)
- ___ CHEST XRAY (IF PAST POSITIVE PPD)
- ___ BLOOD TYPE (done once in life time)
- ___ LIPID PANEL (OVER 40)
 - Total Cholesterol < 240, LDL < 160
 - Triglycerides < 500
- ___ EKG (OVER 40) (within 90 days)
- ___ PSA (MALES OVER 50) (within 90 days)

Vision

- ___ (DD FORM 771) OR PRESCRIPTION FROM DOC

Hearing (within a year)

- ___ DD FORM 2215 or OF 2216
- ___ If H3 a sprint test is needed for a waiver

Immunizations (all complete prior to arrival, annotated on PHS Form 791)

- ___ ANTHRAX (DONE at CAJMTC)
- ___ SMALLPOX (DONE at CAJMTC)

- ___ HEPATITIS A
- ___ HEPATITIS B
- ___ INFLUENZA
- ___ MMR
- ___ TETANUS / DIPHTHERIA-
- ___ PPD (within 90 days)
- ___ TYPHOID
- ___ VARICELLA or Titer
- ___ RABIES (see MOD 11, 15.F.5)

Medications

- ___ List all medications and allergies
- ___ Must have 90 days supply of meds
- ___ Complete malaria prophylaxis for deployment

Dental

- ___ DD form 2813
 - Must be a class I or II
 - Must have Dentist signature
 - Must have dentist state license number unless the dentist is military
- ___ Panorgraphic X-rays are required unless block (5) is marked "yes"

Waivers

Contractor personnel coming to IRDO Camp Atterbury with a "condition generally precluding deployment" must have a complete and valid waiver for the condition upon arrival, or will be non-deployable

IRDO Camp Atterbury and supporting medical unit cannot submit waivers for contractors or contractor personnel, it is now the company's responsibility, and waivers are unlikely

Updated 3 January 2012

More detailed information for each requirement follows

3 January 2012

Important information for Contractors and Contracting Officers (KOs)

Contractor personnel processing through IRDO Camp Atterbury must now meet the standards of:

- Department of the Army Personnel Policy Guidance for Overseas Contingency Operations (PPG) as updated 19 December 2011
- Modification Eleven to USCENTCOM Individual Protection and Individual/Unit Deployment Policy (MOD 11) as updated 2 December 2011
- Department of Defense Instruction 3020.41 “Operational Contract Support” as updated 20 December 2011.

Highlights of changes

Contractor personnel are required to share their medical documentation with employers as a condition of employment. It is now the Contracting Officer’s (KO’s) responsibility, in conjunction with the Contractor, to ensure that Contractor personnel meet the medical and dental requirements for deployment before the SPOT-LOA can be digitally signed.

The physical and dental exams must have been completed within one year before deployment, changed from 90 days. Laboratory tests still have shorter suspense, but a couple of them have changed.

Immunizations must now be annotated on CDC Form 731¹, and are to be administered to contractor personnel before they arrive at IRDO Camp Atterbury. Rabies vaccination is now recommended for certain contractor personnel who will be operating at non-fixed base locations or are required “outside the wire” frequently.

Waivers are now unlikely for Contractor personnel, and all waiver requests must be submitted by the contracting officer or his/her designee. Waivers are to include language explaining why personnel without health issues weren’t chosen for deployment.

If Contractor personnel have one or more of the “conditions generally precluding deployment” listed on the last four pages of this Annex II, and do not have a valid and approved waiver upon arrival at IRDO Camp Atterbury, they will be designated as non-deployable and directed to coordinate with their liaison or employer for transportation home.

¹ The updated guidance DODI 3020.41 “Operational Contract Support” states PHS Form 791, however this form was superseded by CDC Form 731.

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In accordance with Enclosure 3 of DODI 3020.41, contracts shall require that contractors provide medically and physically qualified contingency contractor personnel to perform duties in applicable contingency operations as outlined in the contract. Any CAAF deemed unsuitable to deploy during the deployment process, due to medical or dental reasons, will not be authorized to deploy. For CAAF who are U.S. citizens, contracts shall require contractors to make available the medical and dental records (including panoramic X-rays) of the deploying employees who grant release authorization for this purpose, according to contract terms based on DODI 3020.42, Enclosure 3, DODD 6485.02E, applicable joint force command surgeon guidance, and relevant Military Department Policy (DODI 3020.41, 3.H.1).

Government personnel cannot force a contractor employee to receive an immunization or disclose private medical records against his or her will; therefore, particularly for medical requirements that arise after contract award, the contracting officer will allow contractors time to notify and/or hire employees who are willing to meet Government medical requirements and disclose their private information (DODI 3020.41, 3.H.2).

Defense contractors, under the terms and conditions of their contracts, will provide medically, dentally, and psychologically fit contingency contractor personnel to perform contracted duties (DODI 3020.41, Enclosure 3, 2.A).

DOD contracts requiring the deployment of CAAF shall include medical and dental fitness requirements as specified in this enclosure. Under the terms and conditions of their contracts, defense contractors shall provide personnel who meet such medical and dental requirements as specified in their contracts (DODI 3020.41, Enclosure 3, 1.).

Upon receiving the contracted company's certification *that employees meet deployability requirements*, the contracting officer or his/her representative will digitally sign the LOA. The LOA will be presented to officials at the deployment center (DODI 3020.41, 3.E.1).

Important: Do not generate a SPOT-LOA for contractor personnel who do not meet the medical standards of DODI 3020.41, Enclosure 3 (deployability requirements); do not send them to IRDO Camp Atterbury until they meet these standards. If you do, they likely will be designated "non-deployable."

Just as military personnel must pass a complete health evaluation, CAAF shall have a similar evaluation based on the functional requirements of the job. All CAAF must undergo a medical and dental assessment *within 12 months prior to arrival* at the designated deployment center or Government-authorized contractor-performed deployment processing facility. This assessment should emphasize diagnosing cardiovascular, pulmonary, orthopedic, neurologic, endocrinologic, dermatologic, psychological, visual, auditory, dental, and other systemic disease conditions that may preclude performing the functional requirements of the contract, especially in the austere work environments encountered in some contingency operations (DODI 3020.41, Enclosure 3, 2.B).

While the health evaluation requirement for CAAF has changed to "within 12 months prior to arrival," associated laboratory tests have shorter suspense, per the PPG and MOD 11, and as detailed

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further down in this document. Be aware that a medical provider could question one year old results if (s)he suspects a deployers health has changed significantly.

Contractor personnel must hand-carry all documentation provided by the servicing physician to include all documentation concerning medical issues and abnormal test result follow up; they must be found fit for duty and fit for the specific deployment without limitations or need for accommodation.

Final medical deployment eligibility determination lies with the clinician providers assigned to IRDO Camp Atterbury

The health evaluation forms that IRDO Camp Atterbury uses:

___ DD Form 2808, Report of Medical Exam, completed and signed by your doctor. All identified medical issues and abnormal tests must be resolved and documentation provided on this form by the servicing physician.

___ DD Form 2807-1, Report of Medical History, completed and signed by your doctor.

___ DD Form 2813, Report of Dental Examination, with results, panoramic X-ray, to include dentist's name and signature, state dental license number, office address and phone number.

The following laboratory tests are required prior to arrival at IRDO Camp Atterbury:

Completed within 90 days of arrival at IRDO Camp Atterbury unless otherwise noted

___ Immunization record (PHS Form 791) annotated with all required immunizations. Anthrax and Smallpox will be administered at IRDO Camp Atterbury at Government expense, if stipulated in the contract. Contract shall stipulate that CAAF obtain all other immunizations prior to arrival at the deployment center (DODI 3020.41, Enclosure 3, 6.C). Contract shall stipulate that CAAF and selected non-CAAF bring to the JOA a current copy of CDC Form 731², "International Certificate of Vaccination" (DODI 3020.41, Enclosure 3, 6.E). IRDO Camp Atterbury will require that contractor personnel have their immunizations documented on this required form.

- **ANTHRAX** (mandatory for personnel deploying to the USCENTCOM AOR). For additional information on the anthrax vaccine, see <<http://www.anthrax.osd.mil/>>.
- **HEPATITIS A** - Series of 2 injections, 1st Day 0; 2nd 0 + 6 months. One series in lifetime, no booster required unless recommended by Health Care Provider.
- **HEPATITIS B** - Series of 3 injections, 1st Day 0; 2nd 0 + 30 days; 3rd 0 + 6 months.
- **INFLUENZA** - Yearly, between the months of September and May. For months outside September-May, as recommended by Health Care Provider
- **MMR** (Measles, Mumps, Rubella) (As an adult, once in a lifetime). People born before 1957 do not require a MMR vaccine. MMR should be given either simultaneously or 30 days before receiving anticipated smallpox vaccination.

² See footnote 1 on PHS Form 791

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- **POLIO/IPV** (oral or IM) (As an adult, once in a lifetime).
- **SMALLPOX** (Administration per the latest DoD Guidance) required every 10 years. Must complete Smallpox Vaccination Pre-Screening Form. Send the Pre-Screening Form along with all other medical pre-deployment paperwork. Proof of negative HIV status is required in order to receive smallpox vaccine.
- **TETANUS / DIPHTHERIA**-(Tetanus once every 5 years)(TDAQP Once every 10 years)
- **TUBERCULIN SKIN TEST** (PPD) Annually. Inject sight must be examined 48 to 72 hours after administering. (If there is a history of positive reactions a doctor's evaluation of a chest x-ray/radiology report, not older than one year, must be submitted).
- **TYPHOID** (Every 2 years).
- **VARICELLA** (CHICKEN POX) Vaccine given as two parts shot series. (#1-0, #2-4/8 weeks) Vaccine good for 10 years.
- **RABIES** – for pre-deployment planning purposes only, rabies pre-exposure vaccination series may be considered for personnel who are not expected to be able to receive prompt medical evaluation and risk-based rabies post-exposure prophylaxis within 72 hours of exposure to a potentially rabid animal (MOD 11, 15.F.5). Afghanistan personnel with primary duties outside of fixed bases (MOD 11, 15.F.5.B.1).

___ Urinalysis, routine. Includes testing for color, specific gravity, PH

___ Chem 7/CMP (fasting) (include, as part of the Chem 7, a Hemoglobin A1C if you have diabetes, or a fasting glucose reading over 100. If A1C is over 7.0 is non-deployable

___ Complete Blood Count (CBC)

___ LIPID Profile (over 40 years of age) fasting

___ EKG (if over 40 years of age) if abnormal further testing may be needed from a cardiologist

___ G6PD result

___ Blood Type/RH

___ HIV (within 1 year of deployment)

___ DNA (CAAF who are U.S. citizens samples collected at IRDO and forwarded to AFRSSIR)

___ PSA (males over 50)

___ Framingham risk assessment (all over 40) The result of this test cannot exceed 15% to be considered deployable. This can be found at the following site:

<http://hp2010.nhlbi.nih.net/atpiii/calculator.asp> (without diabetes)

<http://www.newportbodyscan.com/CACrisk.htm> (with diabetes)

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The following will also be required at medical readiness processing:

___LOA

___DOD I.D. Card (issued at IRDO Camp Atterbury)

___Current medications and allergies

___ Bring a 90 day supply³ of all prescription medications. Recommend bringing sufficient amounts of any over the counter medications you may need.

___Malaria prophylaxis. Personnel requiring malaria chemo-prophylactic medications (e.g. doxycycline, mefloquine, etc.) will deploy with enough medication for their entire deployment, including an additional four weeks of necessary terminal prophylaxis with the primary agent used (MOD 11, 15.D.2.A). Pharmacy has historically provided these medications and bills the contractor.

___Special duty qualifications

___Glasses and contacts. If vision correction is required, contractor personnel will be required to have two pair of glasses. A written prescription may also be provided so inserts can be prepared. (DODI 3020.41, Enclosure 3, 3).

___ Allergy Identification Tags (Red) for all allergies (if applicable). AIT can be provided at the deployment center.

___Pre-deployment health assessment (for epidemiological and public health tracking only)

³ MOD 11 states a 180 day supply, but the more recent DODI 3020.41 states a minimum 90 day supply. It is recommended that non-LOGCAP contractor personnel deploy with 180 day supply.

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The completed medical documentation may be:

- **Faxed** (812) 526-1688 (MUST have a cover letter with contact information which includes class dates attending).
- **Scanned and emailed** NDC-Medical at Int-cajmtc-ndc-medical@ng.army.mil

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The conditions listed on the following four pages, unless the particular condition's waiverability is non-applicable (doesn't require a waiver), will disqualify contractor personnel from deploying. Some of the conditions are, and some are not, waiverable. IRDO Camp Atterbury and the medical personnel associated with it do not submit waivers on behalf of contractors or contractor personnel. If contractor personnel come to IRDO Camp Atterbury with conditions precluding deployment but without the required approved waiver, they will be sent home.

Waivers are unlikely for contractor personnel and an explanation should be given as to why other persons who meet medical standards could not be identified to fulfill the deployed duties (DODI 3020.41, 11.A).

It is the contracting officer or his designee's responsibility to submit any waivers for the conditions listed in the table on the following four pages:

Conditions Generally Precluding Deployment	Waiverable
General conditions / restrictions	
Conditions that prevent the wear of personal protective equipment, including protective mask, ballistic helmet, body armor, and chemical/biological protective garments	Y
Conditions that prohibit required theater immunizations or medications	Y
Any medical condition that requires frequent clinical visits or ancillary tests, that fails to respond to adequate conservative treatment, necessitates significant limitation of physical activity, or constitutes increased risk of illness, injury or infection	Y
Any unresolved acute illness or injury that would impair one's duty performance during the duration of the deployment	Y
Any medical condition that requires durable medical equipment or appliances or that requires periodic evaluation/treatment by medical specialists not readily available in theater	Y
Conditions affecting Force Health Protection	
Physical or psychological conditions causing inability to effectively wear PPE	Y
Conditions that prohibit immunizations or the use of FHPPPs required for deployment	Y
Unresolved health conditions requiring care or affecting performance	
Any chronic medical condition requiring frequent clinical visits, fails to respond to adequate conservative treatment, or necessitates significant limitation of physical activity	Y
Absence of dental exam in past 12 months	Y
Pregnancy	N
Condition requiring durable medical equipment or appliances, or periodic evaluation or treatment by medical specialists not readily available in theater	Y
Heat stroke - history of heat stroke, no multiple episodes, no persistent sequelae or organ damage and no episode within past 24 months	Y
Meniere's disease or other vertiginous/motion sickness disorder, unless well controlled on meds available in theater	Y
Unresolved acute or chronic illness or injury that would impair duty performance	Y
Cancer requiring continuing treatment or evaluations	Y
Precancerous lesions requiring treatment and/or evaluation, but not treated or evaluated	Y
Any medical condition requiring surgery or for which surgery has been performed and requires rehab or additional surgery to remove devices	Y
Recent surgery requiring follow up during deployment, or surgeon hasn't cleared/released	Y
Surgery (open or laparoscopic) within 6 weeks of deployment	Y
Renolithiasis - recurrent or currently symptomatic	Y
Musculoskeletal condition that significantly impairs performance	Y
Obstructive Sleep Apnea (OSA) of any severity, if symptomatic despite treatment	N
OSA with AHI and/or RDI > or = 30/hour post treatment	Y
OSA with AHI and/or RDI < 30/hour post treatment does not require waiver except to Afghanistan or Yemen	Y

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OSA, Mild (AHI and/or RDI < 15/hour with or without CPAP treatment is deployable	NA
Acute exacerbation of a physical or mental health condition that could significantly affect duty performance	Y
Conditions that could cause sudden incapacitation	
Recurrent loss of consciousness for any reason	Y
Any medical condition that could result in sudden incapacitation	Y
Stroke within past 24 months	Y
Seizure disorders - either within past year or on anticonvulsants, if stable must be seizure free for 6 months	Y
Diabetes mellitus type I or II on pharmacotherapy with A1C less than 7.0	Y
Type 1 diabetes or insulin requiring type 2 diabetes	N
Type 2 diabetes, on oral agents only, with no change in meds in past 90 days, A1C < 7.0	Y
Framingham 10 year > 15% WAIVER REQUIRED	Y
Framingham 10 year < 15% NO WAIVER REQUIRED	NA
Pulmonary disorders	
Asthma with forced expiratory volume-1 (FEV-1) of less than or equal to 50 percent of predicted FEV-1 despite appropriate therapy and that has required hospitalization at least 2 times in the last 12 months, or requires daily systemic (not inhaled) steroids	Y
Infectious disease	
Active TB	N
Latent TB - negative chest X-ray within 90 days of deployment, documentation of counseling	Y
Active known transmittable blood-borne disease - include full test panel including all antigens, antibodies and viral load	Y
HIV positive with presence of progressive clinical illness or immunological deficiency	N
Sensory disorders	
Hearing loss - individual must have sufficient unaided hearing to perform duties safely IAW Service guidelines. Hearing aids do not preclude deployment	Y
- Hearing level no greater than 30dB for either ear with no individual level greater than 35dB at these frequencies and no greater than 55dB at 4000 Hz	NA
- Hearing level no greater than 30dB at 500 Hz; 25dB at 1000 and 2000 Hz; and 35dB at 4000 Hz in the better ear	NA
Vision loss - Best corrected visual acuity must meet job requirements to safely perform duties	N
Refractive eye surgery - determination by ophthalmologist or optometrist that treatment is complete	Y
Ophthalmic steroid drops post procedure	N
Photorefractive Keratectomy - non deployable for 90 days post-PRK, 30 days post-LASIK	N
Tracheostomy or aphonia	Y
Cardiovascular disorders	
Hypertension, controlled and stable 90 days (Single episode hypertension found on predeployment physical should be accompanied by serial blood pressure checks to ensure hypertension is not persistent)	NA

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Symptomatic coronary artery disease	Y
MI within last year	Y
Cardiac dysrhythmias or arrhythmias, either symptomatic or requiring medical or electrophysiologic control	N
Coronary artery bypass graft in last year	Y
Coronary artery angioplasty in last year	Y
Carotid endarterectomy in last year	Y
Other arterial stenting in last year	Y
Aneurysm repair in last year	Y
Heart failure	Y
Hyperlipidemia controlled with meds regimen, stable for 90 days (TC < 240, LDL < 160, Trig < 500)	NA
Morbid obesity	N
BMI > 40	N
BMI > 35 with serious comorbidities like diabetes, OSA, cardiomyopathy, joint disease	N
Mental health disorders	
Psychotic or bipolar disorders	N
Psychiatric disorders under treatment with fewer than 3 months of demonstrated stability	Y
Clinical psychiatric disorders with residual symptoms that impair duty performance	Y
Mental health conditions that pose a substantial risk for deterioration or recurrence of impairing symptoms in the deployed environment	Y
Substance abuse disorders not in remission	N
Chronic medical conditions that require ongoing treatment with antipsychotics, lithium, or anticonvulsants	N
Medications	
Therapeutic anticoagulants:	N
warfarin	N
Platelet aggregation inhibitors or reducing agents:	Y
clopidogrel	Y
anagrelide	Y
dabigatran	Y
Hematopoietics:	Y
filgrastim	Y
sargramostim	Y
erythropoietin	Y
Antihemophilics:	Y
Factor VIII	Y
Factor IX	Y
Antineoplastics:	Y
antimetabolites:	Y
methotrexate	Y

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hydroxyurea	Y
mercaptopurine	Y
alkylators:	Y
cyclophosphamide	Y
melphalan	Y
chlorambucil	Y
antiestrogens:	Y
tamoxifen, etc.	Y
aromatase inhibitors:	Y
anastrozole	Y
examestane, etc.	Y
medroxyprogesterone (except as contraception):	Y
interferons	Y
etoposide	Y
bicalutamide	Y
bexarotene	Y
oral tretinoin (Vesanoid)	Y
Immunosuppressants (chronic systemic steroids)	Y
Biologic response modifiers (immunomodulators):	Y
abatacept	Y
adalimumab	Y
anakinra	Y
etanercept	Y
infliximab	Y
leflunomide, etc.	Y
Anti-psychotics (except quetiapine "Seroquel" 25 mg at bedtime for sleep):	Y
Antimanic (bipolar) agents:	N
lithium, etc.	N
Anticonvulsants: (except those listed below) NO WAIVER REQUIRED:	Y
Valproic acid:	Y
Depakote, Depakote ER, Depacon, etc.	Y
Carbamazepine:	Y
Tegretol	Y
Tegretol XR, etc.	Y
Varenicline:	N
Chantix	N
Opioids, opioid combination drugs, or tramadol, chronic use	Y
Insulin and exenatide (Byetta)	N

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